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Bib Data Sheet

CONFIRMATION NO. 3445

|  |   |                                    |   |  |                                |
|--|---|------------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/531,791   | <b>FILING OR 371(c) DATE</b><br>10/04/2005<br><b>RULE</b>   | <b>CLASS</b><br>345                | <b>GROUP ART UNIT</b><br>2628   | <b>ATTORNEY DOCKET NO.</b><br>P05,0154 |                                |
| <b>APPLICANTS</b><br>Martin Brunninger, Forstinning, GERMANY;<br>Berthold Kathan, Munich, GERMANY;<br><br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/11708 10/22/2003<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 102 50 148.3 10/28/2002                             |   |                                    |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>10   | <b>TOTAL CLAIMS</b><br>42              | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>26574  |   |                                    |   |  |                                |
| <b>TITLE</b><br>Method and system for creating a graphic user interface for controlling, configuring and/or diagnosing an electrophotographic copying or printing apparatus  |   |                                    |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>2730   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |